

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>YRW</i>	<i>FS3B</i>	
<b>O.I.P.E. CLASSIFIER</b>	<i>SD</i>		<i>3/23/00</i>
<b>FORMALITY REVIEW</b>		<i>15918</i>	<i>6-7-2000</i>
<b>RESPONSE FORMALITY REVIEW</b>			

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
1 Original	
1 ✓ 8-1-02	
2 ✓ 4-15-03	
3 ✓ 10-29-03	
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If more than 150 claims or 10 actions  
staple additional sheet here

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